

MICHIGAN DEPARTMENT OF NATURAL RESOURCES - FOREST, MINERAL AND FIRE MANAGEMENT DIVISION MICHIGAN'S COMMERCIAL FOREST (CF) PROGRAM

APPLICATION TO REMOVE SAND AND/OR GRAVEL FROM CF LAND

Required by authority of Section 51113 of 1994 PA 451, as amended.

NOTE: This application must be typed or printed, signed, and submitted to the DNR forester named in Section 9 located on page 2 of this application. If you have any questions please phone the DNR forester at the number listed in Section 9 on page 2 of this application.

CF Owner (Where official correspondence should be sent.)		Sand/Gravel Owner (If different than CF owner. If not different, indicate same)			
(Where official correspondence should be sent.) Name:		Name:			
Address:		Address:			
City, State, Zip Code:		City, State, Zip Code:			
Work Telephone Number:		Work Telephone Number:			
Home Telephone Number:		Home Telephone Number:			
			☐ Same ☐ Different		
applies (Applicant)	<u>_</u>	ant of Intent gravel from the CF lands	described below	starting on or abo	ut
, and e	nding on or about		·		
County:	Township:		CF Case Number(s):		
Town:	Range:		Section:		
Legal Description(s):			Size of Removal Site (acres):		
4. Utilization			6. Map of Rem	noval Area	
The sand and/or gravel will be utilized by one of	or more of the	North 个 (T) (Section)
following:		(Draw in boundary and cross hatch removal area.)			
□ CF owner, personal use□ Sand/gravel owner, personal use		(Diaw iii bo	diluary and cross	S Hatch removal a	ica.j
Sand/gravel owner, sale to CF owner for personal use					
State of Michigan					
☐ County					
Township					
City or Village					
Other (explain)					
5. Forest Management Plan	ı				
Forest Management Plan on file with DNR					
Forest Management Plan Certificate on file with DNR					
		Scale 1 inch = 1/4 mile / 20 chains / 1320 feet Indicate forest type, trails, water features, and gravel/sand pit.			

	7. Attest to Sand and/or G	Gravel Removal - CF Owner		
I/we hereby certify that to the best sand and/or gravel from the descri		e foregoing statements are true and	correct and I/we apply to remove	
Signed on	, 20, at		_ (City), (State).	
CF Owner	Signature		ate	
		el Removal - Sand/Gravel Owner		
I/we hereby certify that to the best sand and/or gravel from the descri	of my/our knowledge and belief, the	e foregoing statements are true and	correct and I/we apply to remove	
Signed on, 20, at		(City), (State).		
			,	
Sand/Gravel O	wner Signature	D.	ate	
	9. Submitta	al Information		
Please return this complet	ted application to :	Attn: DNR Service Forester	,	
•		(use appropriate address fro	om list below)	
Upper Peninsula	Service Foresters	Lower Peninsula Service Foresters		
Forester	Applicable Counties	Forester	Applicable Counties	
Service Forester Baraga Office PO Box 427 US 41 North Baraga MI 49908 906-353-6651	Baraga, Dickinson, Gogebic, Houghton, Iron, Keweenaw, Ontonagon	Service Forester Indian River Field Office PO Box 10 Indian River MI 49749 231-238-4282 or 231-238-9314	Alcona, Alpena, Antrim, Charlevoix, Cheboygan, Crawford, Emmett, Iosco, Kalkaska, Montmorency, Ogemaw, Oscoda, Otsego, Presque Isle, Roscommon	
Service Forester Escanaba Office 6833 Highway 2 41 & M-35 Gladstone MI 49837 906-786-2351	Alger (West 1/2), Delta (except Garden Peninsula), Marquette, Menominee	Service Forester Cadillac Office 8015 Mackinaw Trail Cadillac MI 49601 231-775-9727, ext. 6043	Arenac, Bay, Benzie, Clare, Gladwin, Grand Traverse, Isabella, Lake, Leelanau, Manistee, Mason, Mecosta, Midland, Missaukee, Newaygo, Oceana, Osceola, Wexford	
Service Forester Newberry Office Route 4, Box 796 Newberry MI 49868 906-293-5131	Alger (East 1/2), Chippewa, Delta (Garden Peninsula Only), Luce, Mackinac, Schoolcraft	Service Forester Southern Lower Peninsula PO Box 30452 Lansing MI 48909-7952 517-241-9054	Allegan, Barry, Berrien, Branch, Calhoun, Cass, Clinton, Eaton, Genesee, Gratiot, Hillsdale, Huron, Ingham, Ionia, Jackson, Kalamazoo, Kent, Lapeer, Lenawee, Livingston, Macomb, Monroe, Montcalm, Muskegon, Oakland, Ottawa, Saginaw, Sanilac, St. Clair, St. Joseph, Shiawassee, Tuscola,	

- DNR USE ONLY -						
Date Received:	Field Approved:	Case No.:	Expiration Date:			
Issued by (name, address and phone number):						